

PATENT APPLICATION FEE DETERMINATION RECORD
Effective December 29, 1999

Application or Docket Number

09/504893

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE		
TOTAL CLAIMS	12	minus 20= *
INDEPENDENT CLAIMS	8	minus 3 = *
MULTIPLE DEPENDENT CLAIM PRESENT		

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	*	Minus	**
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

SMALL ENTITY
TYPE

OR OTHER THAN
SMALL ENTITY

RATE	Fee	RATE	Fee
	345.00		690.00
OR X\$ 9=		OR X\$18=	
OR X39=		OR X78=	
OR +130=		OR +260=	
TOTAL		TOTAL	690-

SMALL ENTITY

OR OTHER THAN
SMALL ENTITY

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
OR X\$ 9=		OR X\$18=	
OR X39=		OR X78=	
OR +130=		OR +260=	
TOTAL ADDIT. FEE		TOTAL ADDIT. FEE	

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	*	Minus	**
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

RATE ADDITIONAL
FEE

RATE ADDITIONAL
FEE

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
OR X\$ 9=		OR X\$18=	
OR X39=		OR X78=	
OR +130=		OR +260=	
TOTAL ADDIT. FEE		TOTAL ADDIT. FEE	

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	*	Minus	**
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

RATE ADDITIONAL
FEE

RATE ADDITIONAL
FEE

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
OR X\$ 9=		OR X\$18=	
OR X39=		OR X78=	
OR +130=		OR +260=	
TOTAL ADDIT. FEE		TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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It does NOT get mailed to the applicant.

NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER: 09/504893

Total Fee Calculation

Fee Code Ssn./Lg.	Total # Claims	Number Entit X	Fee	Fee	Total
			Ssn. Entity	Lg. Entity	
Basic Filing Fee <u>201101</u>	<u>12</u>	X	<u>690</u>	<u>690</u>	
Total Claims >20 <u>201101</u>	<u>3</u>	X			
Independent Claims >3 <u>201103</u>	<u>3</u>	X			
Mult. Dep. Claim Present <u>304104</u>					
Surcharge <u>205103</u>			<u>130</u>	<u>130</u>	
English Translation <u>139</u>					
<u>TOTAL FEE CALCULATION</u>					<u>820.00</u>

Fees due upon filing the application.

Total Filing Fees Due = \$ 820.00

Less Filing Fees Submitted = \$ 0

BALANCE DUE = \$ 820.00

Sherry Davis
Office of Initial Patent Examination

Figure 7